

**❖❖ Folk & Traditional Arts Apprenticeships ❖ Final Report
Idaho Commission on the Arts**

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: (day) 208/_____ (eve) 208/_____
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All Traditional Arts Apprenticeships (TRAap❖) recipients are required to submit a brief final evaluation report within 30 days following the close of the Commission's Fiscal Year ending June 30 of each year.

• **FOR TRAap❖ MASTERS recipients:**

Describe the value and impact of the **Traditional Arts Apprenticeship** award on your practice or on your effort to pass on the artforms or traditions of your community.

• **FOR TRAap❖ APPRENTICES:**

Describe the importance of the skills or knowledge you gained from the apprenticeship. Has it motivated you to continue the practice of the artform and to pass it on to others?

- **Both:** Tell us the ways you were able to share your work with the public.

Signatures: _____ Date: ____/____/____

Mail this form to the **Idaho Commission on the Arts, P.O. Box 83720, Boise, ID 83720-0008.**
Important: Failure to submit this report will affect your receiving a grant or award in the future.

Approved: Program Director, _____	Date: ____/____/____
Grants Officer, _____	Date: ____/____/____